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December 3, 2003

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Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

**CERTIFICATE OF MAILING OR TRANSMISSION**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for First class or Express mail in an envelope addressed to Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO, Group Art Unit 2685, (703) 872-9306 on the date indicated below.

Date: December 3, 2003Name: Jacqueline WilsonSignature: Jacqueline Wilson

Re: Patent Application for:  
"CALIBRATING METHOD AND APPARATUS IN A TELECOMMUNICATION  
SYSTEM"  
Serial No. 09/771,977  
Attorney Docket No. P12291-US1

Dear Sir or Madam:

Enclosed for filing please find the following items relating to the above-identified application:

- (1) Transmittal Letter (1 page)
- (2) Response under 37 C.F.R §1.111 (13 pages)

There is no additional fee for this filing. The commissioner is hereby authorized to charge payment of any additional filing fees required associated with this communication or credit any overpayment to Deposit Account No. 50-1379.

If you have any questions or comments concerning this matter, please feel free to contact the undersigned at 972-583-5799.

Sincerely,

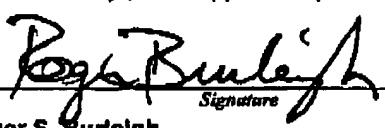
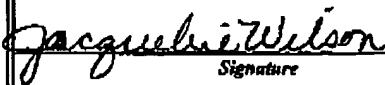
  
Roger S. Burleigh  
Intellectual Property Counsel

RSB/jw





Ericsson Inc.  
6300 Legacy Drive  
Plano, Texas 75024



FM11874 EUS  
ISO 9001

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No.	
Applicant(s): Harry van der Pol				P12291-US1	
Serial No. 09/771,977	Filing Date January 30, 2001	Examiner Lana N. Le	Group Art Unit 2685		
Invention: <b>CALIBRATING METHOD AND APPARATUS IN A TELECOMMUNICATION SYSTEM</b>					
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	30 -	30 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	5 -	5 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. 50-1379 in the amount of \$0.00 A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1379 A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.18. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Roger S. Burtelgh Reg No. 40,542			Dated: December 3, 2003		
Ericsson Inc. 6300 Legacy Drive, M/S EVW 2-C-2 Plano, TX 75024			<div style="border: 1px solid black; padding: 5px;"><p style="text-align: center;">Certificate of Mailing or Transmittal</p><p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for First class or Registered Mail in an envelope addressed to Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO, on the date indicated below.</p><p style="text-align: center;"> Signature</p><p>Jacqueline Wilson 12/03/03</p><p style="text-align: center;">Depositor's Name and Date</p></div>		
cc:					

P11LARGE06

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. P12291-US1														
Applicant(s): Harry van der Pol		Serial No. 09/771,977		Filing Date January 30, 2001		Examiner Lana N. Le		Group Art Unit 2685											
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TOTAL CLAIMS	30	30	0	x \$18.00	\$0.00														
INDEP. CLAIMS	5	5	0	x \$86.00	\$0.00														
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>																			
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$0.00													
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P11LARGE/REV08